

# THINGS I CAN CONTROL



## WHAT I NEED TO FOCUS ON RIGHT NOW:

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|--|--|
| <input type="checkbox"/> How I respond to challenges.            | <input type="checkbox"/> Treating others the way I want to be treated. |
| <input type="checkbox"/> Who I ask for help.                     | <input type="checkbox"/> When I listen to others.                      |
| <input type="checkbox"/> When I ask for help.                    | <input type="checkbox"/> How truthful and honest I am.                 |
| <input type="checkbox"/> Saying I need a break.                  | <input type="checkbox"/> When I talk about my feelings.                |
| <input type="checkbox"/> How I act.                              | <input type="checkbox"/> Expressing what I hope for.                   |
| <input type="checkbox"/> How much effort I put forth.            | <input type="checkbox"/> How I interpret events.                       |
| <input type="checkbox"/> Getting enough sleep                    | <input type="checkbox"/> When I ignore behavior that annoys me.        |
| <input type="checkbox"/> Completing my responsibilities.         | <input type="checkbox"/> Apologizing when I make a mistake.            |
| <input type="checkbox"/> Using I-Statements.                     | <input type="checkbox"/> How I "talk" to myself.                       |
| <input type="checkbox"/> Saying what I need.                     | <input type="checkbox"/> If and when I try again.                      |
| <input type="checkbox"/> How much exercise I do.                 | <input type="checkbox"/> Treating others with kindness.                |
| <input type="checkbox"/> Setting my boundaries.                  | <input type="checkbox"/> Treating myself with kindness.                |
| <input type="checkbox"/> Respecting other people's boundaries.   | <input type="checkbox"/> Saying please and thank you.                  |
| <input type="checkbox"/> When and if I forgive others.           | <input type="checkbox"/> Going outside and enjoying the fresh air.     |
| <input type="checkbox"/> How often I smile.                      | <input type="checkbox"/> How organized or clean I am.                  |
| <input type="checkbox"/> Owning up to my mistakes.               | <input type="checkbox"/> How I hold my body (like my posture).         |
| <input type="checkbox"/> When I show empathy.                    | <input type="checkbox"/> Reminding myself that I am lovable.           |
| <input type="checkbox"/> Whether or not I accept myself.         | <input type="checkbox"/> How I show others that I care about them.     |
| <input type="checkbox"/> What I focus on in this very moment.    | <input type="checkbox"/> Whether I "get back up" after I "fall down."  |
| <input type="checkbox"/> Focusing on the negatives or positives. | <input type="checkbox"/> When I practice gratitude.                    |
| <input type="checkbox"/> What goals I create for myself.         | <input type="checkbox"/> Whether or not I keep my word.                |
| <input type="checkbox"/> The kind of attitude I have.            | <input type="checkbox"/> What coping strategies I use.                 |
| <input type="checkbox"/> How I relate to my feelings.            | <input type="checkbox"/> Whether or not I accept the situation.        |
| <input type="checkbox"/> Whether I help someone out or not.      | <input type="checkbox"/> Using mistakes as opportunities for learning. |
| <input type="checkbox"/> How I take care of & treat my body.     | <input type="checkbox"/> When I take mindful breaths.                  |
| <input type="checkbox"/>   | <input type="checkbox"/>   |